



Patient satisfaction in king Abdulaziz medical city (KAMC)-Jeddah

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Abstract

Objective: To assess the level of patient's satisfaction in different aspects of health care service in King Abdulaziz Medical City-Jeddah.

Study Design: Cross sectional study.

Data Collection Methods: Face to face interview survey method was used. The total study population was 283. Patients who were 18 years or above, mentally competent, with file and had been served by the hospital for at least 6 months were included. Two different questionnaires were used. The questionnaires were validated among a pilot group of twelve patients. The reliability of the questionnaires was measured by alpha coefficient 0.85 and 0.86 respectively. The data was coded by SPSS version 20.

Principal Findings: The mean score of overall patient satisfaction with hospital practice was 93.4 for inpatients and 91.2 for the outpatients. These results imply that the patients were highly satisfied with the hospital performance strategy.

Conclusions: Emphasis on patient satisfaction with medical care services is growing. The results of this study will support policy and decision makers to come up with new strategies that incorporate patient-centered care and increase efficiency and quality care to reach international standards.

Keywords: patient satisfaction, patient compliance, patient centered care, health care surveys, quality

Introduction

Patient satisfaction is used to evaluate healthcare in regard to whether or not expectations have been met ^[1]. It is considered an accurate and direct indicator of a healthcare system's performance ^[2, 3]. Therefore, it offers an opportunity for healthcare providers to better understand patient psychology and health behaviors, which can have a positive impact on health ^[4, 5]. Furthermore, satisfied patients are more likely to follow doctors' instructions and treatment plans ^[6].

Patient satisfaction evaluation began to appear in the healthcare literature in the late 1950s. Throughout the years, it has become more sophisticated and specialized. Such evaluations provide a way to identify areas for improving the overall organizational structure. Patient satisfaction also plays a role in JCI accreditation requirements due to the emergence of strategies that mainly focus on providing patient-centered care, since their satisfaction is considered an important component of healthcare duties ^[5, 7-9].

In 1980, Donabedian studied several aspects of care in order to measure patient satisfaction, including accessibility, continuity, thoroughness, humaneness, informativeness, effectiveness, and cost of care. However, recent studies later showed that these aspects do not necessarily measure the actual quality of care and service experienced by the patient. These findings were attributed to multiple factors that could affect patient satisfaction ratings, such as the influence of their prior experiences with the healthcare system, the impact of their own personal characteristics (e.g., age and education), and the role of patients' psychosocial determinants. It was also reported that older patients and those with low levels of

education were more satisfied compared to others. In addition, false positive satisfaction was observed among some patients due to fear of the possible consequences of sharing negative feedback ^[5, 10].

In Saudi Arabia, the healthcare system has been improving over the past decades. The aims have been to implement more effective action plans and to introduce more innovative strategies for improving the efficiency and quality of care offered to patients' across the country ^[11]. In the early 2000s, the researchers started to conduct specialized studies about patient attitude and satisfaction in primary healthcare services provided in different cities in Saudi Arabia, such as Riyadh, Jeddah, Dammam, Qatif, Tabuk, Hail, Asir, and Almadinah. The interest in this matter demonstrates how patient satisfaction has become an important goal for the nation's health system. Lately, more studies are being conducted to assess more specialized hospitals ^[4].

Currently, the Ministry of Health is the major provider of healthcare services in Saudi Arabia, as it controls 59.5% of the country's health system. The remainder is operated by either the private sector or by separate governmental departments, such as the military. National Guard Health Affairs (NHGA) is one of the biggest providers among military services ^[12]. Only one study has been conducted in NHGA in King Abdulaziz Medical City, Riyadh. The study revealed that the average level of satisfaction was higher among inpatients than outpatients, and women were significantly more satisfied than men with their hospital experience. The emergency department had the lowest average level of satisfaction among patients. However, to the authors' best knowledge, there are

no studies on patient satisfaction in King Abdulaziz Medical City, Jeddah, which is considered one of the biggest tertiary centers in the western region. Therefore, the primary goal of this study was to explore patients satisfaction in this hospital in order to provide further information on how to further improve the quality of care offered by providers.

Methodology

A cross-sectional study that was carried out from July 27 to August 17, 2016, at KAMC Jeddah, a JCI-accredited hospital. Data were collected through in-person interviews over a period of two weeks. The interviews were conducted in Arabic to minimize language bias. The total study population was 283 patients, of which 136 were inpatients in different wards, including the medical, surgical, orthopedics, OB\GYN, and oncology centers. The rest were outpatients in the ambulatory care center and employee health clinic. The sample included patients who were 18 years old or older and had been treated by the hospital for at least 6 months. Those who were intellectually disabled, comatose, or younger than 18 years of age were excluded.

Two questionnaires were used for data collection: one for the

inpatients and another for the outpatients. The questionnaires were validated through a pilot group of 12 patients. The reliability of the questionnaires was measured by the alpha coefficients, which were 0.85 and 0.86, respectively. The data were analyzed using SPSS version 20. Descriptive statistical measures were used to analyze the data by frequencies and percentages. The overall level of patient satisfaction with hospital practice was indicated on an ascending scale of 1 to 4.

Results

The mean score of overall patient satisfaction with hospital practice was 93.4 for inpatients and 91.2 for the outpatients. These results imply that the patients were highly satisfied with the hospital performance strategy. In addition, both inpatients and outpatients were highly satisfied with the quality of the healthcare services (mean scores of 96.3 and 93.2, respectively). Finally, the overall scores for healthcare providers in general were 97.1 for inpatients and 94.6 for outpatients, which mean they were highly satisfied.

Demographic Data: (Table 1)

Inpatient’s Satisfaction Results: (Table 2).

Outpatient’s Satisfaction Results: (Table 3)

Table 1: Demographic data of the patients.

	Inpatients	Outpatients
Gender		
Female	69.9%	53.7%
Male	30.1%	46.4%
Age		
18-24	10.3%	5.4%
25-34	23.5%	33.3%
35-44	12.5%	23.8%
45-54	16.2%	21.1%
55-64	14.0%	8.2%
65-74	11.8%	4.8%
75 and above	11.8%	3.4%
Level of education		
Illiterator	23.5%	8.2%
Elementary school degree	14%	10.9%
Intermediate school degree	11%	12.2%
High school degree	26.5%	22.4%
High level of education	25%	46.3%

Table 2: Inpatient’s Satisfaction Results.

	Not applicable	Unsatisfied	Satisfied
Distance from your home to the Centre	13.2	23.5	63.2
Room			
Comfortability	-	24.3	75.7
Temperature	-	40.4	59.6
Call system	2.9	4.4	92.6
Cleanliness	-	14	86
Light	-	6.6	93.4
Floor	2.2	13.2	84.6
Toilet water temperature	4.4	12.5	83.1
Cleaning staff			
Behaviors	5.9	13.2	80.9
Nurse Staff			
Introduce her/himself properly	-	19.1	80.9
The privacy provided	-	6.6	93.4
Treated you with respect and dignity	-	8.8	91.2
Answered the call button when needed	-	19.1	80.9

Addressed your needs	2.9	11	86
Physician			
Introduced themselves properly	-	7.4	92.6
Treated you with respect and dignity	-	2.9	97.1
Amount of time spent with you	-	8.8	91.2
Willingness to listen carefully to you	-	3.7	96.3
Explaining things in a way you could understand	-	9.6	90.4
Involved you with the treatment plan	1.5	5.1	93.4
Phlebotomist			
Introduced themselves properly	15.4	10.3	74.3
Treated you with respect and dignity	15.4	6.6	77.9
Explanation of your procedure	16.9	14	69.1
The blood drawn quickly with minimal pain	15.4	11	73.5
X-ray technicians			
Introduced themselves properly	22.8	6.6	70.6
Treated you with respect and dignity	22.1	3.7	74.3
Social worker			
Introduced themselves properly	76.5	1.5	22.1
Treated you with respect and dignity	76.5	1.5	22.1
Patient relation officer			
Visited you on daily basis (except weekends)	47.8	13.2	39
Their solutions	69.1	10.3	20.6
Assistant and interpreter			
Treated you with respect and dignity	82.4	0.7	16.9
Diet			
Dietary plane explained clearly	55.9	5.1	39
Food choices	8.8	44.1	47.1
Meals deliver on time	8.1	7.4	84.6
Food temperature	9.6	16.2	74.3
Respectfulness of food service staff	9.6	6.6	83.8
Cleanliness of Tray and utensil	8.1	0.7	91.2
Visitors			
Finding it easy to get to patient's rooms	3.7	17.6	78.7
Respectfulness of the staff while treating the visitors	2.2	5.1	92.6
Adequacy of visiting hours	0.7	51.5	47.8
Staff in general			
Respectful of Saudi culture	-	2.2	97.8
Ease of communication with the staff	26.5	11.8	61.8
Your Overall Satisfaction With			
Our practice	-	6.6	93.4
The quality of your medical care	-	3.7	96.3
Overall rating of care from your provider or nurse	-	2.9	97.1

Table 3: Outpatient's Satisfaction Results.

	Satisfied	Unsatisfied	Not Applicable
Accessibility to the clinic			
Distance to the center	59.9%	25.2%	15%
Parking adequacy	32%	46.9%	21.1%
Clearness of signage and direction	84.4%	11.6%	4.1%
Military police helpfulness if needed	60.3%	6.8%	32.9%
The center's working hours	90.5%	9.5%	-
Prayer room location	44.9%	19%	36.1%
Wheel chair accessibility	21.1%	11.6%	67.3%
Waiting area			
Waiting time at the clinic	39.5%	60.5%	-
Waiting area comfortability	71.4%	27.9%	0.7%
Number of toilets	52.4%	32%	15.6%
Water temperature in the toilet	72.8%	10.2%	17%
Clinic environment			
Clinic comfortability	94.6%	5.4%	-
Clinic temperature	94.6%	5.4%	-
Clinic cleanliness	98.6%	1.4%	-
Clinic light	100%	-	-

Clinic floor	98.6%	1.4%	-
Cleaning staff			
Cleaner behaviors	79.6%	4.1%	16.3%
Receptionist			
The receptionist behaviors	90.5%	7.5%	2%
Appointment desk staff helpfulness	91.2%	6.1%	2.7%
Answering patient's queries	92.5%	4.1%	3.4%
Informing patients about documents needed for treatment eligibility	79.6%	10.9%	9.5%
Ease of making appointments	72.1%	25.9%	2%
Informed the patient if the appointment was delayed	70.7%	10.2%	19%
Making appointments by phone.	34.7%	13.6%	51.7%
Nurses			
Nurses introducing them self properly	74.1%	25.9%	-
The privacy provided by nurses	87.1%	12.9%	-
Nurses respectfulness	95.9%	4.1%	-
Addressing patients' needs	81.6%	4.8%	13.6%
Physicians			
Physician introducing them self properly	76.9%	23.1%	-
Physician respectfulness	92.5%	7.5%	-
Amount of time spent with patients	88.4%	11.6%	-
Explaining things in a way that patients could understand	88.4%	11.6%	-
Willingness to listen carefully to patients	90.5%	9.5%	-
Phlebotomist			
Phlebotomist introducing them self properly	71.4%	16.3%	12.2%
Phlebotomist respectfulness	81.6%	6.1%	12.2%
Explanation of the procedure	67.3%	20.4%	12.2%
The blood drawn quickly with minimal pain	80.3%	7.5%	12.2%
X-ray technicians			
X-ray technician respectfulness	72.8%	5.4%	21.8%
Social worker			
Social worker respectfulness	17%	1.4%	81.6%
Patient relation officer			
Their solutions	21.1%	6.1%	72.8%
Interpreter			
Interpreter respectfulness	16.3%	2%	81.6%
Pharmacy			
Pharmacists respectfulness	89.8%	5.4%	4.8%
Pharmacist explaining how to use the medication in a way the patients could understand	88.4%	5.4%	6.1%
Availability of medication	85.7%	11.6%	2.7%
Saudi culture			
Staff's respectfulness of Saudi culture	85.7%	10.2%	4.1%
Overall satisfaction			
About Ease of communication with the staff	58.5%	15%	26.5%
The hospital practice	91.2%	8.8%	-
The quality of medical care	93.2%	6.8%	-
Health care provider	94.6%	5.4%	-

Discussion

Since the patient centered concept became an important approach and it is considered an excellent indicator of health care systems, we applied this concept in our study and found the following survey results. The inpatients were highly satisfied with the room environment, cleaning staff, nurses, phlebotomists, and physicians. The highest score was for physicians (93.5%). However, the patients were mostly unsatisfied with visiting hours, with 51.5% of them indicating that this issue was worsened by the limited hours available after working hours and the distance between the hospital and residential areas. In addition, patients were unsatisfied with the food choices provided by the hospital, which had a score of 44.1%. However, they were satisfied with its timing, temperature, and cleanness.

The air conditioning was not evenly distributed, with 40.1% patients indicating dissatisfaction. There were some services that the inpatients did not utilize, such as the interpreter (82.4%). Furthermore, 76.5% did not know about the availability of social workers, 58.45% did not ever deal with the patient relationship office, and 55.9% did not interact with the dietitians. The highest score for inpatients was recorded for the respectfulness of Saudi culture by the staff (97.8%), which is a fundamental concern Saudi people. Among outpatients, the highest level of satisfaction was recorded for the clinical environment with a score of 97.28%. Highly positive feedback was obtained about physicians; and nurses' respectfulness (92.5% and 95.9%, respectively). However, 32% of the patients were unsatisfied with the number of the toilets in the clinic, and they complained about

the toilets' cleanliness. The pharmacy revealed a high level of satisfaction, but there was a complaint about the long waiting period. Furthermore, 46.9% of the patients were unsatisfied with the adequacy of the parking area, but the greatest dissatisfaction was observed for the waiting time in the clinic. Lastly, 76.3% of patients did not utilize wheelchairs because they did not know where to obtain them and they were not well displayed.

The demographic distributions indicated the following. Among patients over the age of 55 years, 95% were satisfied with the clearness of signage and directions. The center's working hours were also very satisfactory and scored 100% within this demographic group. Additionally, clinic comfortableness and clinic waiting time scored very high in this group at 100% and 66.7%, respectively.

The appointment desk staff's helpfulness was considered one of the most important services provided to outpatients and had a 97.4% satisfaction rate among women. Around 88.4% of the participants from different levels of education were happy with the amount of time the physician spent with them, which shows that the physicians in the hospital care for outpatients and try to spend adequate time with each one. The only service that was unsatisfactory was the adequacy of the parking area, but only 69.2% of men found that the parking spaces were inadequate.

There was an inverse relationship between the level of education and the satisfaction level with the nurses' call and answering systems for inpatients. Those with a lower level of education had satisfaction ratings of 100% and 90% for both the call and answering systems, respectively. On the other hand, the more educated patients were 88% and 73% satisfied with these categories.

The phlebotomists scored higher satisfaction rates among females in our study. The only in-patient service that scored low in our study was the visiting hours for inpatients. The dissatisfaction rates were 71% for inpatients who are younger than 34 years old. As the inpatient age increases, the level of dissatisfaction decreases. For inpatients 55 years of age or older, the dissatisfaction decreases to 35%.

Limitations

This study involves the following limitations. In the ER department, patient satisfaction was not measured due to administrative constraints.

Conclusion

Emphasis on patient satisfaction with medical care services is growing. The results of this study will support policy and decision makers to come up with new strategies that incorporate patient-centered care and increase efficiency and quality care to reach international standards.

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